

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM

15	10 ,800	DAT	AMAST	ER MAINTE	NANCE	REPORT				By Carol Da		pm, Apr 0:	2, 2014
Co	implete th	is rep	ort whene	ime of the regu ver the Instrum I a copy within	ent is servi	ced or repaire	ed and whe	never it is	ot to excee	ed 35 days)			
DATAMASTER SV NAME OF AGENCY 204081 MSHP							OATE OF INSPECTION 04/01/2014						
1	LOCATION OF INSTRUMENT (STREET AND CITY) Scott County Sheriff's Office-211 S. New Madrid StBenton					## * * * * * * * * * * * * * * * * * * *	TIME OF INSPECTION 8:34 am						
СН	IECKLIS	f: Plac	e a mark i	n the box by ea	ch item if fo	ound to be sati			g within es	tablished lin	nits. (Write	s In observ	ed value
Ø	ere determined.) Unmarked items must be corrected before using i DIAGNOSTIC CHECK (PRINTOUT ATTACHED)						DATE AND TIME (from printout) 04/01/2014 08:35						
		DMPUTER						DETECTOR					
	PROGRAM												
	☑ HEA	☐ HEATERS SAMPLE CHAMBER						🛮 QUARTZ STANDARD					
	☐ FLOW DETECTOR ☐ CALIBRATION												
	PUMP HIGH SPEED				✓ PRIN	ITER	***************************************	***************************************	****************				
Ø	INDICA	OR L	IGHTS	*************************		***************************************			***************************************			***************************************	1211141212222
Ø	SIMULA	TOR S	SOLUTION	N SUPPLIER <u>C</u>		ratories Inc						10/29/201	15
Ø				°C ± 0.2°C)									
Ø	ÇALIBR <i>A</i>	TION	CHECK -	(ONLY ONE	STANDAR	O IS TO BE U	SED PER I	VAINTEN	ANCE RE	PORT)		***************************************	****
	Run three	e tests k the h	using a s	standard solution	on. All three	e tests must b	e within ±5	% of the :	standard v	alue and m	ust have	a spread c	of .005 or
less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE													
		0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0											
TES	ST 1 🐠 ຸ	097	A		TEST 2 «	.099	***************************************		TEST 3 «	* .099	9444 P#4 P<		
Z	PERFOR	M R.F.	I. TEST (I	PRINTOUT AT	TACHED)			•				er entergraphy T. Yet end	
				BREATH TE		E FOLLOWIN	IG RANGE	S SINCE	THE LAST	MAINTEN	ANCE RE	PORT:	<u> </u>
i	USALS	0	(004)	35	(.0509)	1	(.1014)	0	(.151	9) 0	OVI	ER .19	0
IST A	NY NEW PAI OTHER SIDE	RTS AND	.l Describe al Ssary).	NY ALTERATION OR	HODIFICATION	THAT WAS MADE	O RESTORE TH	IE INSTRUME	NT TO OPERAT	E SATISFACTO	RILY AND WIT	HIN ESTABLIS	HED LIMITS
****	1401116	(•)=i3)	833	.,									
HGNA ≱	JUPE	,,	Carill	en l				int full nat lames C.	^{ve} Cooksey	Jr.			
	1 6 86 € 186	MBER/E	C ZOITARIAX	03/11/2	016	••••••		сернопе по 573) 840		***************************************		****************	***************************************
RETU	irn compi		REPORT TO	THE: Br	eath Alcoh	ol Program, M		ent of Fle	alth and Se	enior Servic	es Snuth	east Distri	ict Office

Breath Alcohol Program, MO Department of Health and Senior Services. Southeast District Office 2875 James Blvd. Popiař Biuff, VIO 6.3907



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13290 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is October 29, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOUR: STAME RIGHDRY FRIRD. BHG. DAYFRASIER SERIPL NUMBER 204951 04761/14

SRREST (ME. 08:88
SUBJECT NAME:
RELYTEST
DOB: P1.01290 SEX: P
STRTEZO.L.: MODIESASS
ARRESTING OFFICER:
COUKSEYJJAMESZC
OFFICER I.D.: 886
TEST(MG OFFICER:
COOKSEYJJAMESZC
OFFICER I.D.: 866
PERMIT NUMBER: 848086
EXPIRATION OMFE: 86711716
MISCELLBMEOUS MATA;

-- BREGIS GMS. SIS ---

RADIO INTERFERENCE

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Face This Side Down - This Edge In First

BAC DataMasterEvidence Ticket

ATSSOCRE GIBTE REPRESY PATROL BAC BATAMANTER SERIAL MONDER 20480: 04/01/19 98:35

--- THAGNUSTIC CHECK ---

COMPLEEL Hillian . PROBRES (BO-RY-PROS): Januari Y BUHLAS SEMPLE CHAPMREKI 564 FLOW DETELTORS UKRY PUNG HIST SPEED. FIY DE LECTORE L/DEV FILTERS 16 14 WHEE STANDARTS

PREDIES TEXT

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#10186 CPRN-LOBERS 1895 (CESTER PODES A HUKUMPORES INCOMO CORSTONES CON STATEMENT OF THE ST

perator Signature Janus Cooking of

Operator Signature Janus Confley

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Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MICSOURT STATE MIGHTAY PAIROL BPC DATAMASTER GERLAG HUMBER REAMBL 1 64481/14

TESTING OFFICER:

COOKCEY/JAMESTO

OFFICER (.0.: 206

PERMIT NUMBER: 20065

EXPIRATION DATE: 207(7/2)

MAINTENANCE

--- SUFERVISOR MODE ----

BLAHK TEST	, 현실증	1311114
IHTERNAL STANDARD	WERH JED	68157
EXTERNAL STAMBARS	. <u>69</u> 7	88147
BLRIN TEXT	. មិទទី	用证证证
EXTERMEL STANDARD	.093	9 83348
BLAHK TEST	संस्थित	64000 4 59
EXTERNAL STAMBARD	, 4 95	198149
SLARK TECH	,655	ИВ Е БИ

Operator Signature_

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STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

JAMES C COOKSEY JR.

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs and operate the following breath analyzer(s):

DATAMASTER, INTOX DMT for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. DATE 3/11/2014 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240086 EXPIRES 3/11/2016 DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES

MO 580-0771 (6-10)

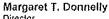
LAB-4 (R6-10)





Agency:

Missouri Department of Health and Senior Services P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466





Jeremiah W. (Jay) Nixon Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Serial Number:	1099		Managara Managara Perusahan ang managara na Sanahan Perusahan Perusahan Sepandan ang Perusahan Sepandan Sebagai			
Manufacturer:	RepCo					
Model Number:	3402C					
		CALIBR	RATION RES	<u>ULTS</u>		
Reference	Simulator					
Temperature 34.02	Temperature 34.00	<u>Bias</u> ±0.02 °C	In Tolerance YES			
34.02	34,00	70.02 C	I EO	•		
This calibration was performed with NIST-Traceable Thermometer SN: 304447						
This calibration w	as performed by:	Bria	Brian M. Lutmer			
This calibration w	as performed:	02/	02/18/2014			

Missouri State Highway Patrol

COPY OF CALIBRATION STICKER

this simulator has been califurated according to DHSS specifications



SIMULATOR SERIAL NO.: EXPIRATION DATE: DATE OF CALIBRATION: NIST REF. THERM, SERIAL NO: BIAS: analyst initials:

02/18/2015 02 18 2014 304447 +0.02 C